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PTO/SB/50 (02-00)

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## REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

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Attorney Docket No.	4010-001
First Named Inventor	ANDERSON
Original Patent Number	5,913,670
Original Patent Issue Date (Month/Day/Year)	June 22, 1999
Express Mail Label No.	EL 748963696 US

APPLICATION FOR REISSUE OF:  
(Check applicable box)

Utility Patent



Design Patent



Plant Patent

## APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)  
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent  
format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)  
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. ☒ Power of Attorney
7. Original U.S. Patent currently assigned? ☐ Yes ☒ No  
(If Yes, check applicable box(es))  
☐ Written Consent of all Assignees (PTO/SB/53)  
☐ 37 C.F.R. § 3.73(b) Statement  
(PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix)  
or large table
9. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all of the following are necessary)
  - a. ☐ Computer Readable Form (CFR)
  - b. Specification Sequence Listing on:
    - i ☐ CD-ROM (2 copies) or CD-R (2 copies); or
    - ii ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

10. ☒ Statement of status and support for all changes  
to the claims. See 37 CFR 1.173 (c).
11. ☒ Original U.S. Patent for surrender offer \*  
☐ Ribboned Original Patent Grant  
☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)  
(if applicable)
13. ☒ Information Disclosure  
Statement (IDS)/PTO-1449 ☒ Copies of IDS  
Citations
14. ☐ English Translation of Reissue Oath/Declaration  
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
17. Other: Suppt. Stmt. & Prelim  
Amd., PTO/SB/53 PTO/SB/56  
PTO/SB/51 Cvr.Ltr.  
& Decl.

\* Offer for Surrender incorporated  
in Cover Letter & Declaration  
at paragraph 27.

## 18. CORRESPONDENCE ADDRESS



Customer Number or Bar Code Label



Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	Dennis H. Rainear; Esq. KILYK & BOWERSOX, P.L.L.C.			
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NAME (Print/Type)	Dennis H. Rainear	Registration No. (Attorney/Agent)	32,486
Signature	<i>Dennis H. Rainear</i>	Date	June 20, 2001

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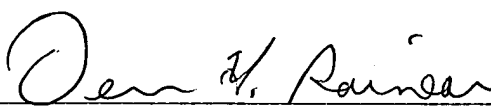
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35355 U.S. PTO

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PTO  
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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 4010-001		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 1	Total Claims (37 CFR 1.16(j))	(B) 25	***5 =	x \$ 9 =	45	or	x \$ =	
(C) 1	Independent claims (37 CFR 1.16(i))	(D) 11	.10 =	x \$40 =	400		x \$ =	
Basic Fee (37 CFR 1.16(h))					\$355		\$	
Total Filing Fee					\$800	OR	\$	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 25	MINUS	** 1	* = 5	x \$ 9 =	45	x \$ =	
Independent Claims (37 CFR 1.16(i))	*** 11	MINUS	***** 1	=10	x \$ 40 =	400	x \$ =	
Total Additional Fee					\$445	OR	\$	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>50-0925</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>800.00</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;"><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 40%;"> <p><u>6/20/01</u> Date</p> </div> <div style="width: 50%; text-align: center;"> <p> Signature of Applicant, Attorney or Agent of Record</p> <p><u>DENNIS H. RAINEAR</u> Typed or printed name</p> <p>Reg. No. <u>32,486</u> 53-A Lee Street Warrenton, VA 20186</p> </div> </div>								

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)**Applicant(s): **Anderson et al.**

Docket No.

**4010-001**

Serial No.

**New Reissue Appln**

Filing Date

**June 21, 2001**

Examiner

**K. ROWAN**

Group Art Unit

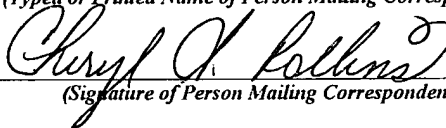
**3643**Invention: **BREAKAWAY LINKS FOR UNDERWATER GEAR.**

I hereby certify that the following correspondence:

**Reissue Pat.App.Trans.; Two copies of Reissue Pat. Appl. w/ Drwg.shts. (total 38 pages); Reissue Fee transmittal.; Reissue Appl. Consent of Assignee; Cvr.ltr.&Decl.; Suptg. stmt & Prelim. Amdmt.; Inf. Dis. Stmt.; Form PTO-1449 w/10 Docs.; Certificate of Mailing; and Check No. 802060263 for \$800.00.**

*(Identify type of correspondence)*

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: The Assistant Commissioner for Patents, Washington, D.C. 20231

**June 21, 2001***(Date)***Cheryl S. Rollins***(Typed or Printed Name of Person Mailing Correspondence)**(Signature of Person Mailing Correspondence)***EL748963696US***("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**